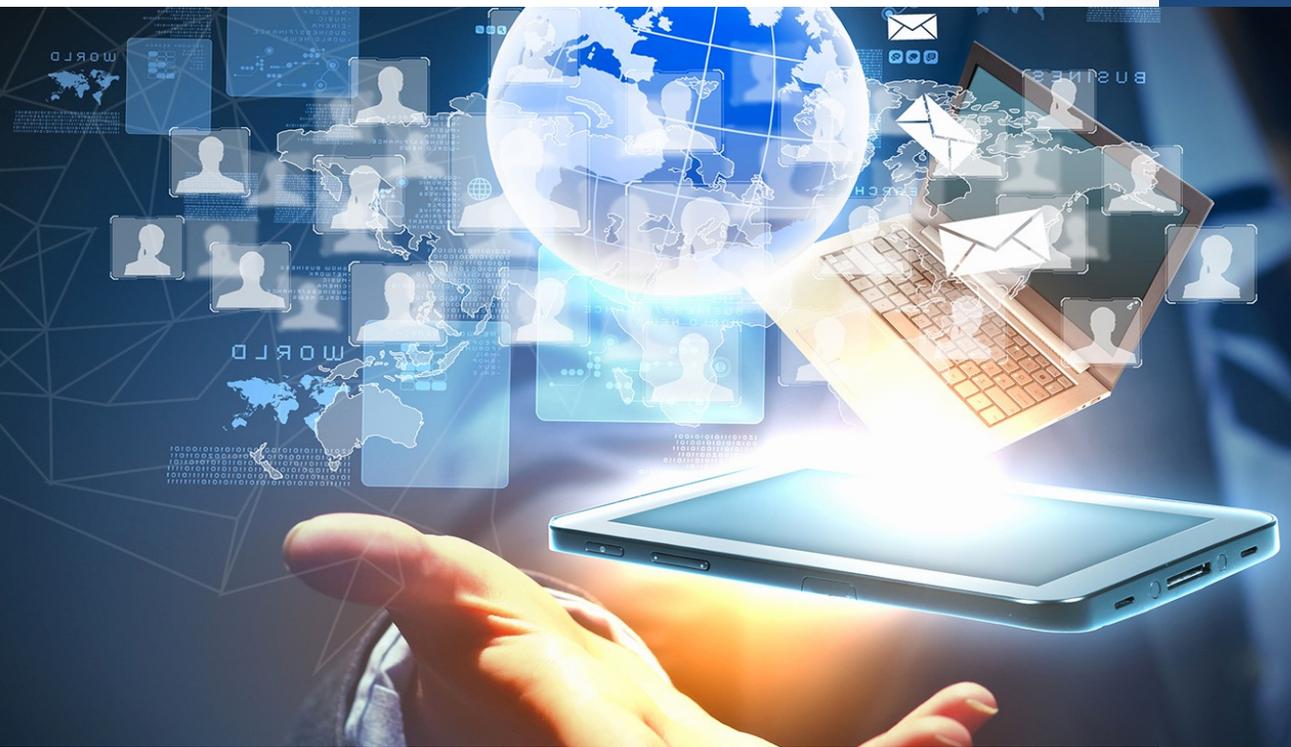




NIC Connecticut CDB Payment System

May 2021



NIC Connecticut's CDB Payment system



Instructions on how to:

- Login for the first time
- Edit Billing information
- Add or edit user information





Powerful Partnerships
for eGovernment™

Login to Your CDB Account

Login:

Password:

Login

[Forgot my password](#)

This is the URL for the CDB Application web site.

Enter the Login ID and temporary password your were provided. Then select "Login".



USER PROFILE

Update User Info

You may edit your user profile information here.

Items marked * are required. Please fill out the fields before clicking on Submit.
Changing your password is optional.

Login: *

New Password: (Password should be at least 8 characters. Current strength requires at least one letter be upper case, one lower case, a numeric value and a special character.)

Confirm Password:

First Name: *

Last Name: *

E-mail: *

Online Security Questions

* Required: Please complete the three security questions with responses.

Enter a valid password and re-type it to confirm.

All responses must be greater than 5 characters.

Select 3 different security questions from the drop down lists.

Select "Submit" to save information and continue to Dashboard.

Cancel Submit





DASHBOARD

From the Dashboard select the "Customer" icon and the Customer Summary screen will be displayed.





Select "Modify Customer" to edit your customer information.

CUSTOMER SUMMARY

Home > Customers > Customer Summary

Customer Information

Customer Name: Test LTC Facility
Contact Name: LTC
Contact Email: bscott@egov.com
Status Code: Active
Date Activated: 08/03/2015
NIC Customer Status Changed: 08/03/2015
Primary NAICS Code: Other Residential Care Facilities

Customer Number: 1012
Phone: 8042400162
Secondary Phone:
Fax:
Customer Address: 1 Con Plaza
Hartford, CT 06103
USA
Secondary NAICS Code:

[Modify Customer](#)

Aging Information

Balance	0-30 Days	31-60 Days	61-90 Days	91-120 Days	121+ Days

Address Information

Address 1: 1 Con Plaza
Address 2:
City: Hartford
State/Province: Connecticut
Postal Code: 06103
Country: USA

Phone Information

Phone: 8042400162
Secondary Phone:
Fax:
Mobile:
Pager:
Alternate Number 1:



MODIFY CUSTOMER

Home > Customers > Customer Summary > Modify Customer

Customer Information

Customer Name: **Customer ID:** 1072

Create Date: 08/03/2015

NIC Customer:

Status Code:

First Name:

Last Name:

Email:

Primary NAICS Code: Other Residential Care Facilities

Secondary NAICS Code:

This field should always remain "Active".

The following section is optional, but if data is entered into this section the fields with an * are required.

Address Information

Address 1:

Address 2:

City:

State/Province:

County:

Postal Code:

Country:

The following section is optional, but if data is entered into this section the fields with an * are required.

Phone Information

Main:

Secondary Phone:

Fax:

Mobile:

Pager:

Alternate Number 1: **Description:**

Alternate Number 2: **Description:**

Remember that any field with an "*" next to it is a mandatory field. Select "Submit" to save your information.





General Information

Billing Information

Users

Pay Online

Click on "Billing Information" to add or edit your companies credit card or bank account information.

CUSTOMER SUMMARY

Home > Customers > Customer Summary

Customer Information

Modify Customer

Customer Name: Test LTC Facility	Customer Number: 1072
Contact Name: LTC carl	Phone: 8042400162
Contact Email: bscott@egov.com	Secondary Phone:
Status Code: Active	Fax:
Date Activated: 08/03/2015	Customer Address: 1 Con Plaza
NIC Customer:	Hartford, CT 06103
Status Changed: 08/03/2015	USA
Primary NAICS Code: Other Residential Care Facilities	Secondary NAICS Code:

Information

Balance	0-30 Days	31-60 Days	61-90 Days	91-120 Days	121+ Days

Address Information

Address 1: 1 Con Plaza

Address 2:

City: Hartford

State/Province: Connecticut

Postal Code: 06103

Country: USA

Phone Information

Phone: 8042400162

Secondary Phone:

Fax:

Mobile:

https://cdh-uat.cdc.nicusa.com/ct/customer/billing_info.html?token=86d6b63d-2945-4ae6-8512-eed5bb926d1d



- General Information
- Billing Information**
- Users
- Pay Online

BILLING INFORMATION

Home > Customers > Customer Summary > Billing Information

Customer Information

Modify Customer

Customer Name: Test LTC Facility
Contact Name: LTC carl
Contact Email: bscott@egov.com
Status Code: Active
Date Activated: 08/03/2015
NIC Customer;
Status Changed; 08/03/2015
Primary NAICS Code: Other Residential Care Facilities

Customer Number: 1072
Phone: 8042400162
Secondary Phone:
Fax:
Customer Address: 1 Con Plaza
 Hartford, CT 06103
 USA
Secondary NAICS Code:

Billing Information

Modify Billing Information

Apply Minimum Billing: No
Waive Surcharge: No
Waive Service Fee: No
Do Not Invoice: No
Is Prepay: No
Invoice Payment Terms: 30
Invoice Template: Login Service By Day

These two buttons should never be used.

Invoice Delivery Method

Modify Invoice Delivery Method

Invoice Type: Emailed

Click this button to add a new credit card or bank account.

Billing Payment Options

Payment Option	Account ID	Status	Actions
Credit Card: *1111 Card Expiration Date: 03/2018 Card Type: Visa	*1111	DEFAULT	Add Billing Payment Option Credit Card ACH (US Only) Delete Edit
Lockbox: bscott@egov.com	bscott@egov.com		

Use these buttons to edit or remove account information.



MODIFY BILLING ACCOUNT

Home > Customers > Customer Summary > Billing Information > Modify Billing Account

Credit Card

Credit Card:

Card Expiration Date: (mm/yyyy)

Card Type:
-- Card type --
AmEx
Discover
MasterCard
Unknown
Visa

Cancel Submit

This is what appears when you select the credit card option. Note that only "Visa" and "MasterCard" numbers are accepted for the ABCMS system. Enter all required fields and select "Submit" to save the information.



MODIFY BILLING ACCOUNT

Home > Customers > Customer Summary > Billing Information > Modify Billing Account

ACH Debit

Routing Number*

Account Number*

Account Type: -- Account Type --

Customer Type: -- Customer Type --

Bank Name*

Its highly recommended that an Account Type be selected. Fill the other required fields. Once the fields have been entered click "Submit".

Cancel Submit

This is what appears when you select the "ACH" option.

BILLING INFORMATION

Home > Customers > Customer Summary > Billing Information

Customer Information

Modify Customer

Customer Name:	Test LTC Facility	Customer Number:	1072
Contact Name:	LTC carl	Phone:	8042400162
Contact Email:	bscott@egov.com	Secondary Phone:	
Status Code:	Active	Fax:	
Date Activated:	08/03/2015	Customer Address:	1 Con Plaza Hartford, CT 06103 USA
	08/03/2015	Secondary NAICS Code:	
	Other Residential Care Facilities		

Modify Billing Information

Waive Surcharge:	No
Waive Service Fee:	No
Do Not Invoice:	No
Is Prepay:	No
Invoice Payment Terms:	30
Invoice Template:	Login Service By Day

Invoice Delivery Method

Modify Invoice Delivery Method

Invoice Type: Emailed

Billing Payment Options

Add Billing Payment Option

▼ Credit Card	*1111	DEFAULT	
Credit Card:	*1111		Delete Edit
Card Expiration Date:	03/2018		
Card Type:	Visa		

Select "Users" to add or edit user information.



General Information

Billing Information

Users

Pay Online

USERS

Home > Customers > Customer Summary > Users

Customer Information

Customer Name: Test

Total records: 6

Users

Login	Name	Role	Email	Phone	Status	
ct_cdbtest	LTC Tester	Customer Admin	bscott@egov.com		Active	<input type="button" value="New Password"/>
ct_cdbtest1	CDB Test	Customer Admin	kayla.oquendo@egov.com		Active	<input type="button" value="New Password"/>
ct_cdbtest2	CDB Test2	Customer Admin	kayla.oquendo@egov.com		Active	<input type="button" value="New Password"/>
ct_cdbtest3	Cdb Test3	Customer Admin	kayla.oquendo@egov.com		Active	<input type="button" value="New Password"/>
ct_cdbtest4	CDB Test4	Customer Admin	kayla.oquendo@egov.com		Active	<input type="button" value="New Password"/>
ct_cdbtest5	CDB Test5	Customer Admin	kayla.oquendo@egov.com		Active	<input type="button" value="New Password"/>

page 1 of 1

First | Previous | Next | Last

Click on a user to edit their information.

Click "Add User" to add a new user to your customer account.

A list of users will be displayed for the customer.

You can reset a user's password using these buttons.

Users can not be deleted for auditing purposes but you can restrict a user's access by clicking here to de-activate their account.



- General Information
- Billing Information
- Users
- Pay Online

Home > Customers > Customer Summary > Users > Add User

Customer Information

Customer Name: Test LTC Facility

This is what you see when you select "ADD" or "EDIT" user.

Customer Number: 1072

Add User

ID:

Login: * (Login should be at least 5 alphanumeric characters.)

Password: *

(Password should be at least 8 characters. Current strength requires at least one letter be upper case, one lower case, a numeric value and a special character.)

To have the system create a temporary password select the "Generate" button.

First Name: *

Last Name: *

Email: *

Status: *

Must change password at next logon

To require the user to change their password when they first sign in check off this check box.

The following section is optional, but if data is entered into this section the fields with an * are required.

Address Information

Address 1: *

Address 2:

City: *

State/Province: *

Postal Code: *

Country:

The following section is optional, but if data is entered into this section the fields with an * are required.

Phone Information

Main: *

Secondary Phone:

Fax:

Mobile:

Pager:

Alternate Number 1: Description:

Alternate Number 2: Description:

Enter all required information designated by an "*" and select "Submit" to save.





Contact NIC Connecticut (NIC CT)

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